ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	RR	70029	1-11-02
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim			Date	Claim		Date	Claim		Date
Final	Original			Final	Original		Final	Original	
1	✔				51			101	
2	✔				52			102	
3	✔				53			103	
4	✔				54			104	
5	✔				55			105	
6	✔				56			106	
7	✔				57			107	
8	✔				58			108	
9	✔				59			109	
10	✔				60			110	
11	✔				61			111	
12	✔				62			112	
13	✔				63			113	
14	✔				64			114	
15					65			115	
16					66			116	
17					67			117	
18					68			118	
19					69			119	
20					70			120	
21					71			121	
22					72			122	
23					73			123	
24					74			124	
25					75			125	
26					76			126	
27					77			127	
28					78			128	
29					79			129	
30					80			130	
31					81			131	
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35					85			135	
36					86			136	
37					87			137	
38					88			138	
39					89			139	
40					90			140	
41					91			141	
42					92			142	
43					93			143	
44					94			144	
45					95			145	
46					96			146	
47					97			147	
48					98			148	
49					99			149	
50					100			150	

If more than 150 claims or 10 actions
staple additional sheet here

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